

Memorandum

To:

Document Control File

From:

Jeff Montera

Date:

May 22, 2002

Subject: Field Changes to the Libby SAP entitled, Final Sampling and

Analysis Plan, Remedial Investigation, Contaminant Screening

Study, April 2002.

Field Changes:

Text Changes

The Reconnaissance team will perform all field screening and sampling activities except soil sampling. The reconnaissance team will complete the majority of the information field form (IFF). The soils team will only add sample locations to the property sketch.

- Section 4.3.3.1 Visual Inspection second paragraph. The reconnaissance team will now do the visual inspection
- Section 4.3.3.3 Soil Sampling Sketch Property will now be completed by the reconnaissance team. Soils teams will only add sample locations to the property sketch.

Figure Changes

- Figure 4-4 Field Team Soil sampling will no longer include Sketch Yard. It should be changed to add sample locations to property sketch.
- The updated Figure 4-4 is attached.

Information Field Form Changes

Two questions were removed from the occupant information section and now only appear in the CSS assessment section. This change was made because the questions appeared on the IFF twice. These two questions are:

3282-116-PP-SAMP-14632

Libby Asbestos RI SAP

- 1. Is there any knowledge of formed miners, close relative of miners, or any highly exposed persons living or visiting the property?
- 2. Is the resident diagnosed with an asbestos related disease?
- The question: Is the resident diagnosed with an asbestos related disease? was changed to Is the resident, past or present, diagnosed with an asbestos related disease?
- Two questions were added to the CSS assessment and titled "Overall Assessment".

 These questions were added to have a way to track if primary sources were observed anywhere on the property and the general location in which they were observed.
 - 1. Are primary source materials present at the property? Yes or No
 - 2. Where are primary source materials located? Inside Outside Both NA
- The updated Information Field Forms are attached

Changes to the Completion of Property Information Field Form

• The updated Completion of Property Information Field Form is attached. Changes are presented as either underline or strikeout text.

 Take custody of samples Task Leader and GISS Identify data gaps Relinquish paperwork and Communicate to CSS Prepare daily • Daily report to samples to SC Figure 4-4: Responsibilities by Team Member for Field Screening and Sampling Inspect yard for OSM Collect samples property sketch Segregate land source material Add sample locations to paperwork use areas Complete · Sketch house if Complete IFF ZAI is present · Leave O&M plan with Yes Inform CSS Task Leader Daily report to CSSTL · Return at later time 4 vailable? ž Owner · Leave flyer Visit selected that need to properties be sampled Identify area 4 Train Field Team Go through training **Task Leader** Coordinator Field Team Specialist (CSSTL) Sample (GISS) CSS GIS (SC)

BD#

LIBBY ASBESTOS PROJECT Contaminant Screening Study Primary Structure and Property Assessment Information Field Form

Field Logbook No.:	Page No.:	Site Visit Dat	te:	
Address:	·			•
Occupant:				
Owner (if different than occupant):			Phone Number:	
Sampling Team:				
Field Form Check Completed by (100	% of forms):		····	
Screening Field Check Completed by	(2% of forms):			
Data Item		Value		Notes
HOUSE ATTRIBUTES				
Property Description	Residential In	dustrial Commercia	ıl	
Surrounding Land Use	Residential In	dustrial Commercia	at .	· · · · · · · · · · · · · · · · · · ·
	School M	ining		
	Other:			
Year of Construction		Unknown		
Square Footage				
Construction Material	Wood frame	Masonry/Stone		
	Other:			
Number of Floors Above Ground	i	er:		
Number of Rooms Per Floor Above	1: 2:	3:		
Ground	Other:	······································		
Basement	Yes	No		
Heating Source	Wood/Coal El	ectric Propane/Ga	s	
	Other:			

Radiant

Forced air

Other:_

Heat Distribution

Address:	•	BD#
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Data Item	Value	Notes
OCCUPANT INFORMATION		
Number of Adults/Employees	1 2 3 4	
	5-15 16-20 21-30 >30	
Number of Children	0 1 2 3 4	
	Other:	
Years at Location	<1 1-5 5-10 10-15 >15	
Was the residence/building remodeled?	Yes No	
	If yes,	
	When (years): <2 2-5 >5	
	Where: Attic Living Areas	
	Garage Basement	
	Other:	
Has resident/business purchased any Libby vermiculite materials from W.R. Grace in the past?	Yes No	
Has the property at this location been used for a for-profit enterprise of distributing, treating, storing, or disposing of Libby vermiculite?	Yes No	
Are there any known areas of exposed vermiculite?	Yes No	
vermiculte?	If yes,	
	Where: Ceiling Walls	
· ·	Floors Attic	
	Other:	

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Data Item	Value	Notes
INDOOR ASSESSMENT		
Vermiculite Insulation Past or Present	Attic: Yes No NA	Visual confirmation of current
	Walls: Yes No NA	presence or absence required for attic.
	Basement: Yes No NA	
	Crawl Space: Yes No NA	
	Other:	
Evidence of Physical Damage?	Yes No	
Evidence of Water Damage?	Yes No	
Evidence of vermiculite used in building materials?	Yes No	
OUTDOOR ASSESSMENT		
Libby Amphibole Sources Present	Garden: Yes No NA	
	Yard: Yes No NA	
	Stockpiles: Yes No NA	
	Other:	
Proximity to Other Properties with	Next door	
Potential Sources of Libby Amphiboles	Within same block	
	Other:	
•		

Address:	BD#
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Data Item	Valu	e	Notes
EXPOSURE ASSESSMENT			
Type and Frequency of Activity Near	Frequency:	Once a day	
Vermiculite Material - Indoor		Once a week	
		Once a month	V
		Once a year	
	Duration of Contact:	<1 hour	
		1-2 hours	·
		2-4 hours	
		>4 hours	
	Extent of Contact:	Heavy	
		Moderate	
		Light	:
Type and Frequency of Activity Near Vermiculite Material - Outdoor	Frequency:	Once a day	
		Once a week	•
		Once a month	
		Once a year	
	Duration of Contact:	<1 hour	
		1-2 hours	
		2-4 hours	
		>4 hours	
	Extent of Contact:	Heavy	
		Moderate	
		Light	

•	
Address:	BD#

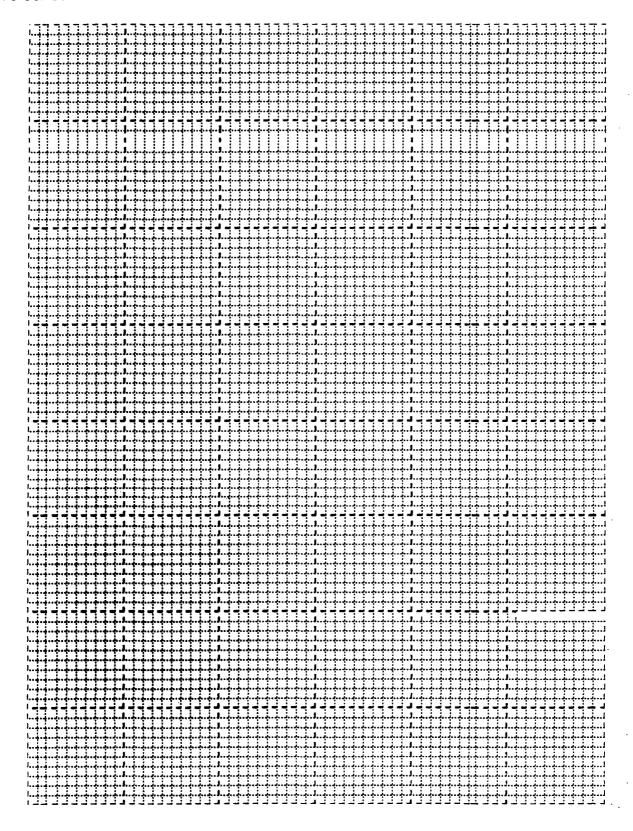
Data Item	Value	Notes
CONTAMINANT SCREENING STUDY ASSESSMENT		
	Occupant Information	
Is there any knowledge of former miners,	Yes No	`
close relative of miners, or any highly exposed persons living or visiting the	Unknown	
property?		
Is the resident, past or present,	Yes No	
diagnosed with an asbestos related disease?	Unknown	
	Indoor Information	
Does the interior have Zonolite attic	Yes No	
insulation?	Unknown	
Did the interior ever have Zonolite attic	Yes No	
insulation?	Unknown	
Are there vermiculite additives in any of	Yes No	
the building materials?	Unknown	
	Outdoor Information	
Is there any evidence of primary source	Yes No	
materials near the property?	Unknown	
Could this have been tracked indoors or	Yes · No	
otherwise spread outdoors on the property?	Unknown	
	Overall Assessment	
Are primary source materials present at the property?	Yes No	
Where are primary source materials located?	Inside Outside	
located:	Both NA	
ADDITIONAL INFORMATION		
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Address:	BD#
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FIELD DIAGRAM OF PROPERTY

Identify important features (i.e. drainage, trees, gardens, suspected Libby amphibole source areas, sample locations, etc).

NOT TO SCALE



Address:	BD#

FIELD DIAGRAM OF PRIMARY STRUCTURE

Floor of House (circle): First

Second Third

Basement

include approximate dimensions of rooms and floor covering type. Use more than one diagram if needed.

Scale: 1/10" = 1 foot

BD#

LIBBY ASBESTOS PROJECT Contaminant Screening Study Secondary Structure Information Field Form

Field Logbook No.:	Page No.:	Site Visit Date:
Address:		Structure Description:
Occupant:		Phone Number:
		Phone Number:
Sampling Team:		

Data Item	Value	Notes
STRUCTURE ATTRIBUTES		
Property Description	Residential Industrial Commercial	
Surrounding Land Use	Residential Industrial Commercial	
	School Mining	
	Other:	•
Year of Construction	Unknown	
Square Footage		·
Construction Material	Wood frame Masonry/Stone	
	Other:	·
Number of Floors Above Ground	1 2 3 Other:	·
Number of Rooms Per Floor Above	1: 2: 3:	
Ground	Other:	
Basement	Yes No	
Heating Source	Wood/Coal Electric Propane/Gas	
	NA Other:	
Heat Distribution	Forced air Radiant .	
	NA Other:	
Was the building remodeled?	Yes No	

Address:	BD#

Data Item	Valu	е	Notes
Are there any known areas of exposed	Yes N	0	
vermiculite?	If yes,		
	Where: Ceiling Wa	alls	
	Floors A	ttic	
	Other:		`.
INDOOR ASSESSMENT	<u></u>		<u> </u>
Vermiculite Insulation Past or Present	Attic: Yes N	lo NA	Visual confirmation of current
	Walls: Yes N		presence or absence required for attic.
	Basement: Yes N		unio.
	İ		
	Crawl Space: Yes	No NA	
	Other:		
Evidence of Physical Damage?	Yes N	o	
Evidence of Water Damage?	Yes N	0	·
Evidence of vermiculite used in building materials?	Yes N	0	
EXPOSURE ASSESSMENT			
Type and Frequency of Activity Near	Frequency:	Once a day	
Vermiculite Material		Once a week	
		Once a month	
		Once a year	
	Duration of Contact:	<1 hour	
		1-2 hours	
	·	2-4 hours	
		>4 hours	
	Extent of Contact:	Heavy	
		Moderate	
		Light	

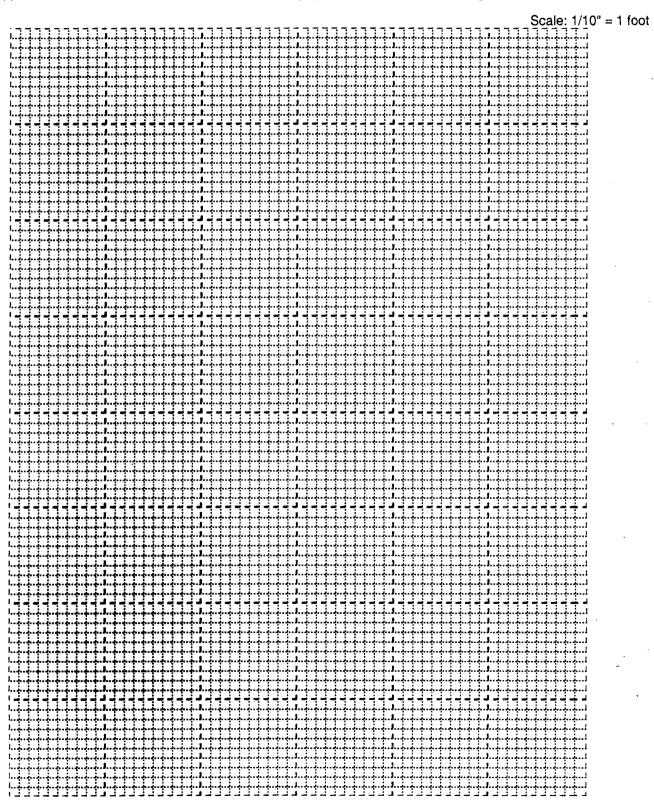
CSS	INFORM	ATION FIR	ELD FORM	(continued)

Address:			
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FIELD DIAGRAM OF SECONDARY STRUCTURE

	Floor of House (circle):	First	Second	Third	Basemer
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Include approximate dimensions of rooms and floor covering type. Use more than one diagram if needed.



CSS INFORMATION FIELD FORM (continued)	
Address:	 BD#

Project: Libby Asbestos Remedial Investigation - Contaminant Screening Study (CSS)

Project N	o. : <u>3282-116</u>	
Document	: No.: CDM-LIBBY-04	
Approved	l by:	
	Project Manager	Date
	Technical Reviewer	Date
	EPA Approval	Date

An information field form (IFF) is to be completed for each structure located on a property. Two IFFs will be used: (1) primary structure and property assessment information field form and (2) secondary structure information field form. The IFFs are completed from both interviews with the occupant/owner and visual inspection of the structures and surrounding properties and are used to facilitate the information-gathering process (interview and visual inspection) of properties during the contaminant screening study (CSS).

Definitions:

<u>Primary structure</u> – Refers to the main inhabitable structure on a property or the main commercial structure on a property.

<u>Secondary structure</u> – Refers to structures other than the primary structure located on a property (i.e., shed, barn, detached garage with an attic, etc.). Attached garages are considered part of the primary structure.

<u>Occupant</u> – Refers to the person currently living in a primary residential structure or business occupying an address.

Owner – Refers to the person who owns a residential property (may or may not be the current occupant) or person who owns a commercial property.

Primary Structure and Property Assessment Information Field Form

Each entry on the IFF should be completed following the guidance procedure, and any notes on each item should be written in the notes column to the right of each data item.

Header Information

BD#: Refers to the location identification (ID) number of the structure the IFF is being completed for. The field team obtains a list of available numbers from the sample coordinator.

Field Logbook No.: The number of the field logbook that is used to record information specific to the property being assessed on the IFF.

Page No.: The page numbers in the logbook that contain information specific to the property being assessed on the IFF.

Site Visit Date: Date of site visit, in the form MM/DD/YY.

Address: The address of the property being assessed on the IFF. Addresses are to be entered in the following format:

Street number - Direction - Street Name - Street Abbreviation

Where:

Street number = the number of the street address

Direction = the abbreviation of the street direction (N, S, E, or W), when applicable

Street name = correct spelling of the street name

Street abbreviation = when applicable

Road - Rd

Avenue - Ave

Street - St

Circle – Cr

Place - Pl

Boulevard – Blvd Highway - Hwy

Examples:

510 N Mineral Ave

1616 Rainy Creek Rd 521 Pipe Creek Rd

Structure Description: Description of the structure specific the IFF (i.e., house, trailer, garage, shed, barn)

Occupant: Name of current occupants <u>or business name</u> of the primary structure. In the case of a commercial property, the occupant information would not be completed.

Occupant Phone number: Phone number of occupant of the primary structure.

Owner: Only needs to be completed if the owner of the structure or property is different than the current occupant (i.e., renter). Required for commercial properties.

Owner Phone number: Phone number of the owner of the property. For residential properties, only complete if the owner is different than the current occupant. Required for commercial properties.

Sampling Team: Full name and company of each member of the team assessing the property (i.e., members sampling and/or completing IFF).

Field Form Check Completed by (100% of forms): To be signed, after IFF is checked by the field team member not completing the IFF.

Screening Field check Completed by (2% of forms): To be signed, after IFF is checked by the CSS task leader.

House Attributes

Property Description: Description of the property specific to the IFF being completed.

Surrounding Land Use: Description of the land use groups surrounding the property specific to the IFF being completed. Indicate all that apply.

Year of Construction: Year structure was constructed. If occupant and/or owner do not know what year the structure was complete, choose unknown.

Square Footage: Calculated from the field diagram or estimated from occupant/owner interview.

Construction Material: Material structure is constructed from. If other than wood, masonry, or stone, choose other and provide a description.

Number of Floors Above Ground: Number of floors above ground specific to the structure that is assessed on the IFF. If other than 1, 2, or 3, provide number of floors in blank. The number of floors above ground should include the attic only if it is used as a living space.

Number of Rooms Per Floor Above Ground: Number of rooms per floor that is above ground. Enter number of rooms per floor next to the floor number. If more than three floors are present, provide the information on the blank.

Basement: If a basement is present, choose yes. If a basement is not present, choose no. Basement refers to a room below ground level that a person can enter and stand upright (i.e., a crawl space is not a basement).

Heating Source: Method by which heat is produced in the structure. If a method other than wood/coal, electric, or propane/gas is used as a heating source, choose other and provide a description.

Heat Distribution: Method by which heat is distributed throughout the structure. Occupant and/or owner should be able to provide this information.

Occupant Information

Number of Adults/Employees: For residences, provide the number of adults that live at the residence; for a commercial property, provide the number of employees that work in the structure.

Number of Children: For residences, provide the number of children living there or visiting a commercial property for an extended period of time per day. † for a commercial property, indicate the number of children as zero.

Years at Location: Number of years current occupant or business has occupied the structure.

Was the residence/building remodeled? Provide yes or no as an answer. If yes, provide years since remodeling and location of remodeling. If occupant/owner is unsure, provide a note in the provided space.

Has resident/business purchased any Libby vermiculite materials from W.R. Grace in the past? Based on occupant/owner interview. Provide yes or no as an answer. If occupant/owner is unsure, provide a note in the provided space.

Has the property at this location been used for a for-profit enterprise of distributing, treating, storing, or disposing of Libby vermiculite? Based on occupant/owner interview. Provide yes or no as an answer. If occupant/owner is unsure, provide a note in the provided space.

Has any present or former occupant worked at the W.R. Grace mine and/or any former processing plant? Based on occupant/owner interview. Provide yes or no as an answer. If occupant/owner is unsure, provide a note in the provided space.

Has any present or former occupant been diagnosed with an asbestos related disease? Based on occupant/owner interview. Provide yes or no as an answer. If occupant/owner is unsure, provide a note in the provided space.

Are there any known areas of exposed vermiculite?: Base yes or no answer on occupant/owner interview and visual inspection of home. If yes, provide location of exposed vermiculite.

Indoor Assessment

Vermiculite Insulation Past or Present: Visual inspection of attic is required to answer item. If owner/occupant indicates past presence of vermiculite insulation, note in space provided and year of removal if available. Past or present presence in walls, basements, and crawl spaces can be answered from the occupant/owner interview, but this must be noted in the area provided.

Evidence of Physical Damage? Based on visual inspection of interior

Evidence of Water Damage? Based on visual inspection of interior

Evidence of vermiculite used in building materials? Based on occupant interview and/or visual inspection. If owner is unsure or visual inspection is not comprehensive, provide this information in the notes area.

Outdoor Assessment

Libby Amphibole Sources Present: Based on visual inspection of the property. If vermiculite piles, tremolite rocks, or other primary sources are observed, provide yes as the answer. If primary sources appear absent but vermiculite is observed in garden soils or other disturbed areas, provide yes as the answer with notes in the area provided.

Proximity to Other Properties with Potential Sources of Libby Amphiboles: Based on observations of nearby properties. If near properties are known to contain potential sources of Libby amphiboles, it should be noted in this data item.

Type and Frequency of Activity Near Vermiculite Material – Indoor: Based on occupant/owner interview. Frequency of contact, duration of contact, and extent of contact are required. If no indoor vermiculite present, provide this information in the notes area.

Type and Frequency of Activity Near Vermiculite Material – Outdoor: Based on occupant/owner interview. Frequency of contact, duration of contact, and extent of contact are required. If no outdoor vermiculite present, provide this information in the notes area.

CSS Assessment

Occupant Information:

- Is there any knowledge of former miners, close relative of miners, or any highly exposed persons living or visiting the property? Based on verbal interview.
- Is the resident, past or present, diagnosed with an asbestos related disease? Based on verbal interview.

Indoor Information:

- Does the interior have Libby vermiculite attic insulation? Based on visual inspection.
- Did the interior ever have Libby vermiculite attic insulation? Based on verbal interview.
- Are there vermiculite additives in any of the building materials? Based on visual inspections and verbal interview.

Outdoor Information:

• Is there any evidence of primary source material near the property? Based on visual inspection.

• Could this have been tracked indoors or otherwise spread outdoors on the property? Based on visual inspections and verbal interview.

Overall Assessment

- Are primary source materials present at the property?: If any primary source (visible vermiculite indoors, outdoors; tremolite rocks, ZAI) are present answer question yes. If these primary sources are not present answer question no.
- Where are primary source materials located? Inside, Outside, Both, NA:
 NA will apply if no primary sources are present.

Additional Information

Any information concerning the presence of sources that are identified in the occupant/owner interview.

Field Diagram of Property

To include location of all structures, observed sources, and location of all disturbed areas.

Field Diagram of Primary Structure

To be completed for homes with vermiculite insulation past or present. Complete one sheet per floor and provide scale drawing of rooms.

Secondary Structure Information Field Form

All data items are discussed above. Not all items on the primary structure form are required on the secondary structure form.

Heating Source and Heating Distribution may not be applicable to a secondary structure.